# Adding CDASS to the Brain Injury Waiver

Webinar for Case Managers

#### DATE / TIME:

December 17, 2013 1:30-3:00 pm

#### **AUDIO OPTIONS:**

**Use Telephone** 

Dial: 1-877-820-7831

Access Code: 982280





#### What You Will Learn

- CDASS Basics
- CDASS expansion information and timelines
- How to enroll a CDASS client Step-By-Step
- Ongoing support for case managers and clients
- Resources

#### What is CDASS?

- Established in 2002
- Gives Medicaid recipients the opportunity to manage their own attendants who provide personal care, homemaker and health maintenance services
- **Empowers** clients to select, train and manage the employees of their choice to best fit their unique needs

## Why CDASS?

#### CDASS is intended to:

- Increase client's independence and self-sufficiency
- Improve quality of support services client receives
- Enable client to have a more healthy and productive life
- Allow client greater flexibility and control in managing their support needs
- Places client in role of making decisions about support services

## **Principles of Consumer Direction**

**FREEDOM** – The opportunity to choose where and with whom one lives as well as how one organizes all important aspects of one's life with freely chosen assistance as needed

**RESPONSIBILITY** – The obligation to use public dollars wisely and to contribute to one's community along with freedom and choice, the client also has a responsibility to follow the rules of CDASS

**AUTHORITY** – The ability to control some targeted amount of public dollars

**SUPPORT** – The ability to organize that support in ways that are unique to the individual

**CONFIRMATION** – The recognition that individuals with disabilities themselves must be a major part of the redesign of the human service system of long term care

## **Expansion to Brain Injury Waiver**

- Stakeholder workgroup focused on expanding CDASS
  - Brain Injury waiver targeted as next waiver for CDASS based on stakeholder feedback
- CDASS is not available for clients enrolled in the BI Waiver and residing in supportive living programs
- Approximately 140 people currently on BI waiver will now have access to CDASS

### **Expansion Timeframe**

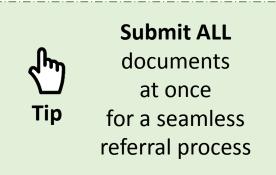
- Waiver amendment has been submitted to Centers for Medicare and Medicaid Services (CMS)
  - Requested January 1, 2014, start date
  - State must receive CMS approval prior to providing new service delivery option to clients enrolled in the BI waiver

 Effective January 1, 2014, pending CMS approval, you may begin submitting referrals for clients in the BI waiver

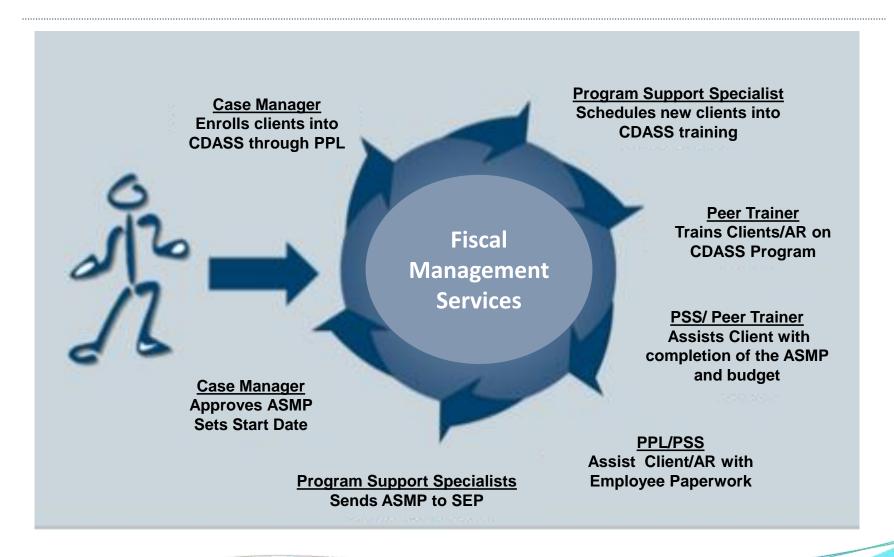
#### **Referral Process**

- Case Manager should complete Client Referral form and attach:
  - Physician Statement
  - Task Worksheet

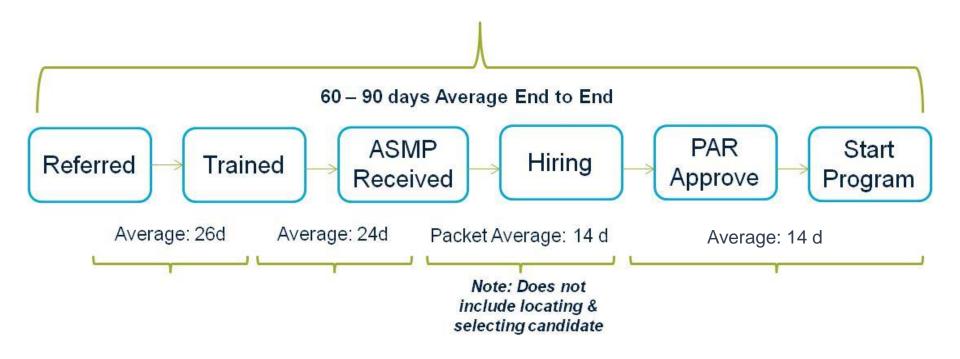
- If client requires an AR, please include:
  - AR Designation and Affidavit
  - AR Screening Questionnaire



#### **Enrollment Process**



## How long will it take?



### **Completing Task Worksheet**

- Developed by the case manager with the client
- Talk with the client to determine the average amount of time needed to complete each task
- Amount of time for all services and supports cannot exceed 24 hours per day
- Tasks and the time needed should be identified needs in the ULTC 100.2
- Provide client with a copy of the task worksheet when complete



## **Allocation Development**

- Use task worksheet
- Enter information into Estimator Tool
- Example: 12 hours of personal care, 6 hours of homemaker and 22 hours of health maintenance per week

SERVICE	Weekly Hours of Service	Adjusted Hourly Rate	# of Weeks	Total Authorized for CDASS Period	Daily Cost Per Unit	Monthly Allocation
Homemaker	6.00	\$ 13.42	52.14285714	\$4,197.50	\$11.50	\$349.79
Personal Care	12.00	\$ 13.42	52.14285714	\$8,398.65	\$23.01	\$699.89
Health Maintenance	22.00	\$ 25.31	52.14285714	\$29,035.75	\$79.55	\$2,419.65
Maintenance	22.00	Ş 23.31	32.14263714	\$29,033.73	779.55	Ş2,41 <del>3</del> .03
Totals				\$41,631.90	\$114.06	\$3,469.33

## **PPL Provides CDASS Training**

- Each client creates an Attendant Support Management Plan (ASMP), based on their individual needs and allocation
- PPL provides training and support to clients / ARs in the development of the ASMP
- The training includes **hands-on practice** on how to complete a budget and determine wages and hours

#### **PPL Review of ASMP**

Client / AR **must** send their completed ASMP to a Program Support Specialist (PSS) for review

#### The PSS will:

- Review for completeness
- Ensure budget is within the determined Monthly Allocation
- Ensure budget is calculated correctly
- Send ASMP to Case Manager within 5 days for final approval

#### **Notification of Start Date Needed**

Case Manager receives communication from the Program Support Specialist when the client is ready to begin services

#### This means:

- Client / AR has completed training
- Client / AR has completed the ASMP with the case manager approval
- Client / AR has TWO attendants
- Attendants have all the employment paperwork complete and passed background checks

#### When do I issue a start date?

At this point, the Case Manager can issue a start date for CDASS and communicate this to the client / AR and PPL

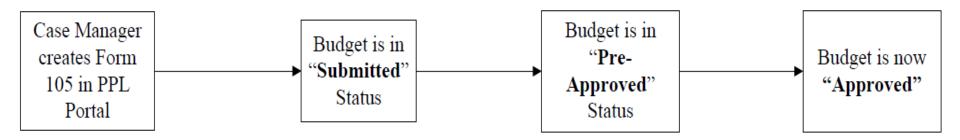
Keep in mind...

- Start date must be either the 1st or 16th of the month
- There must be an approved Xerox PAR with CDASS prior to the start of services
- PAR must be entered into the PPL Web Portal in approved status

#### Start Date for BI Waiver Participants

- Pending CMS approval CDASS will be available in the BI Waiver effective January 1, 2014
- Referrals can begin January 1, 2014
  - Start Date for BI participants would follow standard procedure
- Start date cannot precede effective date as approved by CMS
  - PARs with start date prior to January 1, 2014 will be denied

## **PAR Entry and Submittal**



Case Manager enters all HCBS services, completes Form 105 and clicks submit. Mails Form 105 to Xerox Xerox processes and approves PAR. Case Manager enters approved PAR ID# in PPL Portal and clicks pre-approve PPL verifies all the information processed by Xerox matches the information in the PPL Portal. PPL also verifies client is eligible for Medicaid services.

### **Ongoing Allocation Management**

Client Monthly Statements – shows expenditures and hours billed by each service and each employee and includes monthly balance

**PPL Web Portal Budget Display** – displays real time expenditures and total Overspent/ Underspent Amount

Overspending Monthly Report – details for each Case Management Agency client that has overspent their allocation for the month by dollar figure and percentage of monthly allocation

## **Amending Allocations**

#### Short Term

- Cannot replace acute home health services
- Can additional services be covered by remaining allocation
- Should be effective as soon as possible

#### Long Term

- New assessment
- New ASMP
- Revise Service Plan

#### **Ongoing Support and Communication**

Program Support Specialists are available to assist with any continued questions or concerns from Case Managers or CMA Administrators on:

- Budget issues and retraining if needed
- PAR entry troubleshooting
- General Web Portal issues
- Client Statement or time sheet questions
- Authorized Representative changes

#### **Case Manager Monitoring**

- Contact client once a month for first three months
- Contact client quarterly after the first three months
- If the AR has changed Contact client monthly for first three months after change

#### What am I monitoring?



Tip

- CDASS Management
- Satisfaction of services
- Quality of services

#### **Attendants & Authorized Representatives**

- Clients who require an AR may not serve as AR for another CDASS client
- An AR cannot be compensated for AR services or reimbursed for CDASS services

Attendants must be 18 years of age

Must have two attendants to start services

#### Waste, Fraud and Abuse

 Report suspected cases to PPL or to HCPF Program Integrity

- Examples
  - Services while in hospital
  - CDASS payment for services other than those allowed under Personal Care, Homemaker, Health Maintenance Activities
  - Fraudulent timesheets

## **Ending CDASS**

 Transitioned from CDASS when alternative services have been secured

- Prior to termination from CDASS (unless involuntary) client can request
  - retraining by FMS
  - designation of AR or new AR
- Termination can be voluntary or involuntary
- Notice of termination in accordance with rule 8.057

#### **CDASS** Resources

For detailed information about CDASS requirements:

#### Rules/Statute

- 10 CCR 2505-10 Section 8.510
- 25.5-6-11.1 C.R.S.

#### **Information**

- Colorado.gov/hcpf > Clients & Applicants > Long-Term
   Services and Supports > CDASS
- CDASS Fact Sheet
- PPL Website

## **PPL Program Support Specialists**

Denver Metro	Sharita Richmond	srichmond@pcgus.com	720-274-6331
Denver Metro West	Linda Sienkiewicz	lsienkiewicz@pcgus.com	720-274-6322
Northern Front Range	Deb Stephens	dstephens@pcgus.com	720-274-6304
Colorado Springs	Vacant	cocdassadmin@pcgus.com	1-888-752-8250
Northeast	Pam Gonzalez	pgonzalez@pcgus.com	720-274-6332
Central Rocky Mountain	Nadia Robie	nrobie@pcgus.com	720-274-6329
Western Slope	Dan Hallett	dhallett@pcgus.com	720-274-6328
Southern	Kitty Swartwood	kswartwood@pcgus.com	720-274-6330

#### **Contacts**

## Health Care Policy & Financing

Candie Dalton
Program Administrator

candie.dalton@state.co.us



#### **Public Partnerships (PPL)**

**Customer Service** 

1-888-752-8250

Fax and Email

1-866-947-4813

cocdassadmin@pcgus.com



